PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 1997

Application or Docket Number

09-030-854

CLAIMS AS FILED - PART I

FOR	NUMBER FILED (Column 1)	NUMBER EXTRA (Column 2)
BASIC FEE	⬛	
TOTAL CLAIMS	20 minus 20 =	* 0
INDEPENDENT CLAIMS	3 minus 3 =	* 0
MULTIPLE DEPENDENT CLAIM PRESENT		

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐   OR   **OTHER THAN SMALL ENTITY**

RATE	FEE	OR	RATE	FEE
⬛	395.00	OR	⬛	790.00
x$11=		OR	x$22=	
x41=		OR	x82=	
+135=		OR	+270=	
TOTAL		OR	TOTAL	790

CLAIMS AS AMENDED - PART II

OTHER THAN SMALL ENTITY   OR   SMALL ENTITY

AMENDMENT A

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	RATE	ADDI-TIONAL FEE	OR	RATE	ADDI-TIONAL FEE
Total	*	Minus	**	=	x$11=		OR	x$22=	
Independent	*	Minus	***	=	x41=		OR	x82=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+135=		OR	+270=	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	RATE	ADDI-TIONAL FEE	OR	RATE	ADDI-TIONAL FEE
Total	*	Minus	**	=	x$11=		OR	x$22=	
Independent	*	Minus	***	=	x41=		OR	x82=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+135=		OR	+270=	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	RATE	ADDI-TIONAL FEE	OR	RATE	ADDI-TIONAL FEE
Total	*	Minus	**	=	x$11=		OR	x$22=	
Independent	*	Minus	***	=	x41=		OR	x82=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+135=		OR	+270=	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.
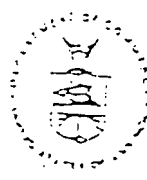
NOTICE OF FILING/CLAIM FEE(S) DUE
TO ENSURE PROPER CREDIT OF FEES, PLEASE RETURN A COPY OF T:
FEE CALCULATION SHEET WITH YOUR RESPONSE.

APPLICATION NUMBER: __09 -030 -854__

Total Fee Calculation

	Fee Code: Sm./Lg	Total # Claims	Number Extra	X	Fee Sm. Entity	Fee = Lg. Entity	Tota
Basic Filing Fee	201/101						
Total Claims >20	203/103	____ -20 =	____	X	____	____	____
Independent Claims >3	202/102	____ -3 =	____	X	____	____	____
Mult. Dep Claim Present	204/104						
Surcharge	205/105				____	____	____
English Translation	139				____	____	130

__TOTAL FEE CALCULATION__

130

Fees due upon filing the application:

Total Filing Fees Due = $ _____

Less Filing Fees Submitted - $ _____

BALANCE DUE = $ __$ 130.00__

Mary Hunter
Office of Initial Patent Examination